

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MA	70591	8/13
O.I.P.E. CLASSIFIER	h		8/6
FORMALITY REVIEW	CA	109139	8.13.99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
6	12/2/99
7	12/2/99
8	12/2/99
9	12/2/99
10	12/2/99
11	12/2/99
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13	12/2/99
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49	12/2/99
50	12/2/99

Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here